

Idaho State Department of Agriculture

Division of Agricultural Resources

PO Box 7723

Boise, ID 83707

Phone: (208) 332-8600

Website: www.agri.idaho.gov

OFFICE USE ONLY

Check # _____

Fee \$ _____

Record # _____

PRIVATE APPLICATOR PESTICIDE LICENSE APPLICATION

(Please Type or Print Legibly)

APPLICANT _____ SS# or ISDA LIC# _____

HOME MAILING ADDRESS _____

CITY _____ ST _____ ZIP _____ COUNTY _____

HOME PH _____ Farm/Company/Agency Name _____

I am applying for: (Government Agency Employees - *No fee* - (Exemption does not apply for personal use))

____ Restricted Use (RU) Category * \$10.00 fee

____ Chemigation (CH) Category \$20.00 fee (Chemigation Inventory form also required)

____ Both (RU & CH) Categories \$30.00 fee (Chemigation Inventory form also required)

***NOTE: If you have a current RU category and have tested for Soil Fumigation since 2013, SF will automatically be added to your license.**

IMPORTANT LICENSE INFORMATION:

Idaho has a pre-set, two year licensing period. However, if you apply for a license mid-cycle, you will have a license for less than two years. See chart below for expiration dates and contact the licensing office with any questions (Contact information is provided above).

LAST NAMES	LICENSE EXPIRES	LAST NAMES	LICENSE EXPIRES
A-D	March of Odd years	M-P	March of Even Years
E-H	July of Odd Years	Q-T	July of Even Years
I-L	October of Odd Years	U-Z	October of Even Years

- NOTES:**
- 1) If applicant is renewing license, attach a copy of the front and back of your signed license.
 - 2) If applicant is **not** an Idaho resident and seeking reciprocity from the following states:
 - a) Washington and Oregon applicants must submit a printout of current license status from that State's Department of Agriculture website.
 - b) Montana, Utah, and Wyoming applicants must request a *Letter of Good Standing* from that State's Department of Agriculture.

I certify that this information is correct. I am at least eighteen (18) years of age.

DATE _____ APPLICANT SIGNATURE _____